Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

10660037

| CLAIMS AS FILED - PART I (Column 1) (Column 2)       |  |                                  |   |                     |                                |                  |   | SMALL ENTITY TYPE OR |                        |         | OTHER THAN<br>SMALL ENTITY |                        |
|--|--|----------------------------------|---|---------------------|--------------------------------|------------------|---|----------------------|------------------------|---------|----------------------------|------------------------|
| TOTAL CLAIMS   |  |                                  | 19                                      |                     |                                |                  | ſ | RATE                 | FEE                    |         | RATE                       | FEE                    |
| FO   | R  |                                  | NUMBER FILED                            |                     | NUMBER EXTRA                   |                  |   | BASIC FEE            | 385.00                 | OR      | BASIC FEE                  | 750                    |
| TOTAL CHARGEABLE CLAIMS (9                           |  |                                  |   | minus 20=           |                                | * D              |   | X\$ 9=               |                        | OR      | X\$18=                     |                        |
| INDEPENDENT CLAIMS                                   |  |                                  | 4 mir                                   | nus 3 =             | * [                            |                  |   | X43=                 |                        | OR      | × 84                       | 84                     |
| MU   | LTIPLE DEPEN   | DENT CLAIM PR                    | RESENT                                  |                     |                                |                  | ŀ | +145=                |                        | OR      | +280                       |                        |
| * If the difference in column 1 is less than zero, e |  |                                  |   |                     | r "0" in c                     | olumn 2          | Į | TOTAL                |                        | OR      | TOTAL                      | 834                    |
| CLAIMS AS AMENDED - PART II                          |  |                                  |   |                     |                                | (Column 3)       |   | SMALL                | ENTITY                 | OR      | OTHER<br>SMALL             | THAN                   |
| ۷  |  | CLAIMS H<br>REMAINING N          |   | HIGH<br>NUM         | IEST<br>IBER                   | R PRESENT        |   | RATE                 | ADDI-<br>TIONAL        |         | RATE                       | ADDI-<br>TIONAL        |
| AMENDMENT  |  | AFTER<br>AMENDMENT               | , | PREVI<br>PAID       | FOR                            | EXTRA            |   |                      | FEE                    |         |                            | FEE                    |
|  | Total  | *                                | Minus                                   | **                  |                                | =                |   | XS 9=                |                        | OR      | X\$18=                     |                        |
| ME   | Independent  | *                                | Minus                                   | ***                 |                                | =                |   | X43=                 |                        | OR      | X86=                       |                        |
|  | FIRST PRESE  | NTATION OF MI                    | ULTIPLE DEI                             | PENDEN              | T CLAIM                        |                  |   | +145=                |                        | OR      | +290=                      |                        |
|  |  |                                  |   |                     |                                |                  |   | TOTAL                |                        | OR      | TOTAL<br>ADDIT. FEE        |                        |
| (Column 1) (Column 2) (Column 3)                     |  |                                  |   |                     |                                |                  |   |                      |                        |         | ADDIT. I CE                |                        |
| AMENDMENT B  |  | CLAIMS REMAINING AFTER AMENDMENT |   | HIGI<br>NUN<br>PREV | HEST<br>MBER<br>IOUSLY<br>DFOR | PRESENT<br>EXTRA |   | RATE                 | ADDI-<br>TIONAL<br>FEE |         | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total  | w                                | Minus                                   | **                  |                                | =                |   | KS 9=                |                        | OR      | X\$18=                     |                        |
|  | Independent  | *                                | Minus                                   | ***                 |                                | =                |   | X43=                 |                        | OR      | X86=                       |                        |
| L <sub></sub>  | FIRST PRESE  | NTATION OF M                     | ULTIPLE DE                              | PENDEN              | T CLAIM                        |                  | ] | - · 45=              |                        | OR      | +290=                      |                        |
|  |  |                                  |   |                     |                                |                  |   | TOTAL                |                        | OR      | TOTA                       | L                      |
|  |  |                                  |   | _                   |                                | 0.1              |   | ADDIT FEE            | L                      | ייים    | ADDIT. FE                  | E                      |
| _  | <u> </u>   | (Column 1)<br>CLAIMS             | 1                                       | ∺iG                 | ımn 2\<br>HEST                 | Column 31        | Ì |                      | ADDI-                  | 7       |                            | ADDI-                  |
| AMENDMENT C  |  | REMAINING<br>AFTER<br>AMENDMENT  |   | PREV                | MBER<br>IOUSLY<br>D FOR        | PRESENT<br>EXTRA |   | RATE                 | TIONAL<br>FEE          |         | RATE                       | TIONAL<br>FEE          |
|  | Total  | *                                | Minus                                   | **                  |                                | =                |   | AS 9=                |                        | OR      | X\$18=                     | 1                      |
| ME   | Independent  | *                                | Minus                                   | ***                 |                                | =                |   | X43=                 |                        | 1<br>OR | X86=                       |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |                                  |   |                     |                                |                  |   | 1,15_                |                        | 1       | +290=                      | 1                      |
|  | If the entry in cour   | mn 1 is iess than t              | ne entry in cou                         | umn 2. wri          | te 'C' in o                    | oiumn 3          |   | -145=<br>TOTAL       |                        | OR      | TOTA                       | L                      |
|  | * If the entry in column 1 is less than the entry in column 2, write "5" in column 3  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1 |                                  |   |                     |                                |                  |   |                      |                        |         |                            |                        |